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October 18, 2007

Kerry Weems
Acting Administrator
Centers for Medicare and Medicaid Services
Hubert H. Humphrey Building
200 Independence Avenue, SW, Room 314G
Washington, DC 20201

Dear Acting Administrator Weems:

As Chairman of the Special Committee on Aging (Committee), I take very seriously the Committee's responsibility to protect and advocate on behalf of our nation's seniors. Part of this responsibility is ensuring that seniors are receiving appropriate and cost-effective prescription drugs.

Therefore, I read with great interest an October 12, 2007 Wall Street Journal article entitled "Genentech to Limit Avastin Availability, Use of Cancer Treatment For Eye Ailment Hurts Sales of Targeted Drug." The article detailed Genetech Inc.'s plan to stop making its cancer drug Avastin available to certain pharmacies. Most troubling about this proposed plan is the fact that it may be due in part to an effort to boost sales of a chemically similar, yet far more expensive drug- Lucentis. The article specifically states:

"Medicare, which offers health coverage for the elderly and disabled and is a big purchaser of the two drugs, has said curbing Avastin could cost taxpayers \$1 billion to \$3 billion a year. Using a cheaper drug not only would preserve Medicare funds, but would trim beneficiaries' exposure to high co-payments, program administrators say."

Any instance that could cost taxpayers potentially one to three billion dollars is of great concern to me. This past June an ophthalmologic surgeon representing Physicians for Clinical Responsibility (PCR) testified before the Committee at a hearing I chaired examining the pharmaceutical industry's influence on physicians and their prescribing behaviors. This physician related to my Committee staff troubling, detailed information regarding Genentech's refusal to allow further studies on the use of Avastin in combating many serious eye ailments- including wet macular degeneration- many of which occur primarily in the elderly.

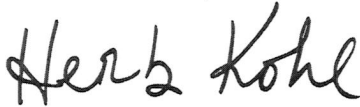
Understanding that approval of drugs for particular uses falls within the jurisdiction of the Food and Drug Administration; I am writing today to inquire what

CMS is doing to examine and address this potential cost to the taxpayers. More specifically:

- 1.) How much has Medicare spent on Lucentis and Avastin during the period 2005- present?
- 2.) What measures, if any, have CMS officials taken to explore the reduction of expenditures on expensive drugs such as Lucentis by using alternative treatments such as Avastin?

I'm sure that you agree with me that saving Medicare dollars and more importantly tax payer dollars should be of the utmost priority. I look forward to receiving your response by November 2, 2007. Should you have any questions regarding this matter, feel free to contact Jack Mitchell or Cecil Swamidoss of my staff on 202-224-5364.

Sincerely,

A handwritten signature in black ink that reads "Herb Kohl". The signature is written in a cursive, slightly slanted style.

Herb Kohl
Chairman